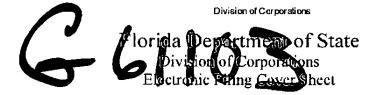
1/23/2017



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document

(((H170000204743)))



H170000204743ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

IT JAN 23 AM II; 27

OF PAN IT STATE

TALL A HASSEE FLORIDAS

REGISTERED AGENT CHANGE HIGHLANDS MOBILE HOME PARK & SALES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

1. 2/2

COVER LETTER

Division of Corporations		
HIGHLANDS MOBILE HOME PARK & SAL	.ES, INC.	
Name of Co	rporation	
DOCUMENT NUMBER:		****
The enclosed Statement of Change of Registered Office	/Agent and fee are	submitted for filing.
Please return all correspondence concerning this matter	to the following:	
Cheyenne Moseley		
Name of Con	tact Person	
Legalzoom.com, Inc.		
Firm/Co	mpany	
101 N. Brand Blvd., 11th Flr.		
Addr	ess	
Glendale, CA 91203		
City/State and	d Zip Code	
quirogapropertiesllc@gmail.com	n	
E-mail address: (to be used for fu	ture annual repor	t notification)
For further information concerning this matter, please c	all:	
Cheyenne Moseley	800 at ()	773-0888, ext. 9724 2 Daytime Telephone Number
Name of Contact Person	Area Code &	Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departs	ment of State.	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division Clifton 1	ddress: nent Section n of Corporations Building recutive Center Circle
* man a 4 \$		sec, FL 32301

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute, ange is submitted for a corporation organized under the laws of the State of Florida		-
	er to change its registered office or registered agent, or both, in the State of Florida	•	
1. The name of	the corporation: HIGHLANDS MOBILE HOME PARK & SALES, INC.		
2. The principal	office address: 17730 US Highway 27, Lot 6, Clermont, FL 34711		

3. The mailing	address (if different): 2720 Cabernet Lane, Annapolls, MD 21401		
		ر از این در	<u></u>
4. Date of incom	poration/qualification: 09/26/1983 Document number: G61103	<u> </u>	-72
	d street address of the current registered agent and registered office on file with the runent of State: (If resigned, enter resigned)	355	23 H
	Victoria E Quiroga	~~ <u>`</u>	(1) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
	155 Peruvian Avenue	(5)	5
	Palm Beach, FL 33480	•	4,6
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office United States Corporation Agents, Inc.		
	13302 Winding Oak Court, Suite A P.O. Box NOT acceptable		
	Tampa, FL 33612		
The street addr	ess of its registered office and the street address of the business office of its regist	erod age	nt,
Such change wanthorized by	as authorized by resolution duly adopted by its board of directors or by an officer he board, or the corporation has been notified in writing of the change.	so	
\times (// v	Lorraine Q Mullaly, President		_
I hereby accep. I further agree	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete fmy duties, and I am familiar with and accept the obligation of my position as retains document is being filed merely to reflect a change in the registered office address that the corporation has been notified in writing of this change.	istered ess, I	
1	M 1/20/2017		
la	gnature of Registered Agent Date		-
If signing on b	ehalf of an entity:		
Cheyenne Mos	seley		
	Typod or Printed Name		
	* * * FILING FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 .CR2E045.(03/12)